

MIED (Rev. 03/11) Prisoner Civil Rights Complaint

**Official Use Only**

Case Number	Judge	Magistrate Judge
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Case: 2:12-cv-12544  
 Judge: Duggan, Patrick J.  
 MJ: Hluchaniuk, Michael J.  
 Filed: 06-12-2012 At 03:24 PM  
 PR Reed v. Doe, et al (tam)

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**PRISONER CIVIL RIGHTS COMPLAINT**

This form is for use by state prisoners filing under 42 U.S.C. § 1983 and federal prisoners filing pursuant to Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics, 403 U.S. 388 (1971).

Plaintiff's Information			
Name	Dwayne Reed		
	Prisoner No. 487837		
Place of Confinement	(MDOC) Michigan Department Of Corrections		
Street	City	State	Zip Code
4000 COOPER ST	Jackson	MI	49201
Are there additional plaintiffs?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If yes, any additional plaintiffs to this action should be listed on a separate 8½" x 11" sheet of paper and securely attached to the back of this complaint. You must provide names, prisoner numbers and addresses for all plaintiffs.			

Defendant's Information			
Name	OFFICER John Doe et. al,		
Position	DEARBORN HEIGHTS POLICE OFFICER		
Street/P.O. Box	City	State	Zip Code
	DEARBORN HEIGHTS MI	MI	
Are you suing this defendant in his/her:	<input type="checkbox"/> Personal Capacity <input type="checkbox"/> Official Capacity <input checked="" type="checkbox"/> Both Capacities		
Are you suing more than one defendant?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, any additional defendants to this action should be listed on a separate 8½" x 11" sheet of paper and securely attached to the back of this complaint. You must provide their names, positions, current addresses and the capacity (personal, official or both) in which you are suing them.			

## I. PREVIOUS LAWSUITS

Have you filed any other lawsuits in state or federal court relating to your imprisonment?

Yes

No

If "Yes," complete the following section. If "No," proceed to Part II.

Please list all prior civil actions or appeals that you have filed in federal court while you have been incarcerated.

Docket or Case Number:
Name of Court:
Parties (Caption or Name of Case):
Disposition:

Docket or Case Number:
Name of Court:
Parties (Caption or Name of Case):
Disposition:

Docket or Case Number:
Name of Court:
Parties (Caption or Name of Case):
Disposition:

***Any additional civil actions should be listed on a separate sheet of 8½" x11" paper and securely attached to the back of this complaint.***

## **II. STATEMENT OF FACTS**

State here, as briefly as possible, the facts of your case. Describe how each defendant is involved. Include the names of other people, dates and places involved in the incident. Do not give any legal arguments or cite any cases or statutes.

~~Sherman Mathad~~

### **III. STATEMENT OF CLAIMS**

State what rights under the Constitution, laws, or treaties of the United States have been violated, and be specific. Set forth each claim in a separate paragraph. If you intend to allege several related claims, number and set forth each claim on a separate 8½" x 11" sheet of paper and securely attach the papers to the back of this complaint.

~~See Appendix~~

## **IV. RELIEF**

State briefly and exactly what you want the Court to do for you.

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*Sophia M. Reed*

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I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct.

Executed (signed) on 6/3/2012 (date).

*Sophia M. Reed*

Signature of Plaintiff

I, DWayne Reed, am lodging a formal complaint against the Dearborn Heights Police Department and Officer John Doe (the arresting officer), <sup>DR</sup>~~DR~~ and the County of Wayne for the following:

## II. STATEMENT OF FACTS

- (1) On 1-16-2012, Lawrence Dixon and I was coming out of a gas station. Dearborn Heights Police was sitting on Michigan Ave. The Officer then stopped us and told us that he "was going to keep us NIGGERS out of Dearborn Heights".
- (2) Officer John Doe then put my hands behind my back and cuffed me.
- (3) Next, he threw me on the ground and picked me up. I then said, "I was going to get a lawyer" and he told me, "I was going to need one when he got done with me!"
- (4.) He continued to beat me to the point where I needed medical attention.
- (5.) He then took me to the Dearborn Heights Police Department. I ask for Medical treatment and was repeatedly denied.
- (6) 3 day later (at or around 1-19-2012) I was transported to Wayne County Jail. Once there, I promptly asked for medical treatment as I was suffering from dizzy spells, hip injuries, and blurred vision, all due to the beating I suffered at the hands of Officer John Doe. I received medical attention finally after about 2 weeks worth of complaining in the Wayne County Jail (I had a knot <sup>on</sup> ~~on~~ my head, one under my eye; my nose was busted, ect..).
- (7) I was given pain medication, and X-RAYS.
- (8) As I continued to suffer from the injuries with no true adequate medical attention, I then asked my attorney to help me get medical attention.

(9.) My attorney then asked the Judge and in response, he stated that he would get me some <sup>medical</sup> ~~needed~~ attention. I never received that medical attention.

(10.) ~~I then reported this~~ <sup>I then reported this</sup> incident to Channel 2 Fox News to no avail.

(11.) I reported it to <sup>Internal</sup> Affairs to no avail.

(12.) I reported it to the NAACP to no avail.

(13.) I reported it to RON SCOTT (Police Against Brutality) to no avail.  
I've gotten NO RESPONSE from anyone.

### As A Result

(14.) I was charged and convicted of Resisting Arrest (a charge that I didn't commit), and made to serve 1-2 years in prison.

(15.) I have trouble sleeping at night

(16.) I have dizzy spells ~~and trouble sleeping~~ <sup>DR</sup> (HARD to STAY FOCUSED) <sup>OR</sup>

(17.) I have blurred vision <sup>DR</sup> (HARD to REMEMBER)

(18.) Severe headaches

(19.) I now walk with a limp because of pain in my hip

### IV. RELIEF

(20.) I would like to be released immediately

(21.) I would like medical attention for vision, head injuries, hip problems, <sup>DR</sup> psychological, etc...

(22.) I ask that said officer be sanctioned for his actions, and the others as well for denying me medical attention.

(23.) I want to be compensated for damages I now suffer as a result of the brutality/denial of medical Treatment/false imprisonment/etc..

(24.) I ask that I don't be retaliated against due to my claim.

Print First & Last Name: REED DWAYNE  
Prisoner Number: 48 7837  
CHARLES E. EGELER RECEPTION & GUIDANCE CENTER  
3855 Cooper Street,  
Jackson, Michigan 49201-7517

CLERK, UNITED STATES District Court, Northern District of Michigan  
THEODORE LEONARD S. COURTHOUSE  
231 W LAFAYETTE BLDG, 27TH FLOOR  
DETROIT, MI 48226

Re

4822632742

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## CIVIL COVER SHEET FOR PRISONER CASES

Case No. <u>12-12544</u>	Judge: <u>Patrick J. Duggan</u>	Magistrate Judge: <u>Michael Hluchaniuk</u>
<b>Name of 1<sup>st</sup> Listed Plaintiff/Petitioner:</b> Dwayne Reed	<b>Name of 1<sup>st</sup> Listed Defendant/Respondent:</b> John Doe, et al	
Inmate Number: <u>487837</u>	<b>Additional Information:</b>	
<b>Plaintiff/Petitioner's Attorney and Address Information:</b>		
<b>Correctional Facility:</b> Charles Egeler Reception and Guidance Center 3855 Cooper Street Jackson, MI 49201-7547 JACKSON COUNTY		

**BASIS OF JURISDICTION**

2 U.S. Government Defendant  
 3 Federal Question

**ORIGIN**

1 Original Proceeding  
 5 Transferred from Another District Court  
 Other:

**NATURE OF SUIT**

530 Habeas Corpus  
 540 Mandamus  
 550 Civil Rights  
 555 Prison Conditions

**FEE STATUS**

IFP *In Forma Pauperis*  
 PD Paid

**PURSUANT TO LOCAL RULE 83.11****1. Is this a case that has been previously dismissed?**

Yes       No

> If yes, give the following information:

Court: \_\_\_\_\_  
 Case No: \_\_\_\_\_  
 Judge: \_\_\_\_\_

**2. Other than stated above, are there any pending or previously discontinued or dismissed companion cases in this or any other court, including state court? (Companion cases are matters in which it appears substantially similar evidence will be offered or the same or related parties are present and the cases arise out of the same transaction or occurrence.)**

Yes       No

> If yes, give the following information:

Court: \_\_\_\_\_  
 Case No: \_\_\_\_\_  
 Judge: \_\_\_\_\_